



International Journal of Homoeopathic Sciences

E-ISSN: 2616-4493
P-ISSN: 2616-4485
Impact Factor (RJIF): 5.96
www.homoeopathicjournal.com
IJHS 2025; 9(4): 570-573
Received: 18-08-2025
Accepted: 20-09-2025

Dr. Anjana S Mohan
PG Scholar, Department of
Homoeopathic Repertory &
Case Taking, White Memorial
Homoeopathic Medical College
& Hospital, Chevaracode,
Attoor, Kanniyakumari, Tamil
Nadu, India

Dr. Bhuvaneshwari G
Associate Professor,
Department of Homoeopathic
Repertory & Case Taking,
White Memorial
Homoeopathic Medical College
& Hospital, Chevaracode,
Attoor, Kanniyakumari, Tamil
Nadu, India

Corresponding Author:
Dr. Anjana S Mohan
PG Scholar, Department of
Homoeopathic Repertory &
Case Taking, White Memorial
Homoeopathic Medical College
& Hospital, Chevaracode,
Attoor, Kanniyakumari, Tamil
Nadu, India

A case report: Rapid resolution of verruca vulgaris with homoeopathy using douglass skin repertory and renewed dynamization

Anjana S Mohan and Bhuvaneshwari G

DOI: <https://www.doi.org/10.33545/26164485.2025.v9.i4.I.1968>

Abstract

Warts are common skin growths caused by the human papillomavirus (HPV), with over 90 subtypes leading to varied clinical presentations. In homoeopathy, warts are classified as one-sided diseases or external local maladies, often resulting from miasmatic suppression or disease stasis. Homoeopathy offers a non-invasive and individualized therapeutic approach, emphasizing totality of symptoms and repertorial analysis. This case study reports the treatment of a 4-year-old child presenting with multiple hard, itchy, and bleeding warts on the fingers. A detailed case-taking followed by repertorial analysis using Douglass's *Skin Repertory* indicated *Nitric Acid* 0/3 as the simillimum. Complete resolution of warts was observed within 7 days of treatment initiation. This case highlights the effectiveness of individualized homoeopathic prescribing in treating warts without invasive methods. The rapid and complete recovery demonstrates the curative potential of LM potencies, especially in pediatric cases where gentle treatment is essential. Homoeopathy, when applied with precision and based on detailed symptomatology, provides a safe and effective alternative for managing cutaneous conditions such as warts, reinforcing its value in clinical practice.

Keywords: Warts, nitric acid, douglass's repertory of skin, homoeopathy, cauterisation, lm potency

Introduction

Warts are benign lesions that occur in the mucosa and skin. Warts are caused by the human papillomavirus (HPV), with over 100 types of HPV identified. HPV may occur at any site. The primary manifestations of HPV infection include common warts, genital warts, flat warts, deep palmoplantar warts (Myrmica), focal epithelial hyperplasia, Epidermodysplasia verruciform, and Plantar cysts. Warts may be transmitted by direct or indirect contact. Events that disrupt the normal epithelial barrier increase the likelihood of developing warts. Treatment may be difficult. Warts often resolve spontaneously within a few years. Some high-risk HPV subtypes are associated with malignancies, including types 6, 11, 16, 18, 31, and 35. Malignant transformation usually is seen in patients with genital warts and immunocompromised patients. HPV types 5, 8, 20, and 47 have oncogenic potential leading to epidermodysplasia verruciform^[1].

Results Epidemiology

Warts can occur at any age. Although rare in infancy and early childhood, prevalence increases among school-aged children and peaks at 12 to 16 years^[1].

Etiology

Warts are caused by HPV, which is a double-stranded, circular, supercoiled DNA virus enclosed in an icosahedral capsid and comprising 72 capsomers. More than 200 types of HPV have been identified. Common wart types and associated HPV types include the following:

- Common warts - HPV types 2 and 4 (most common), followed by types 1, 3, 27, 29, and 57.
- Deep palmoplantar warts (myrmecia) - HPV type 1 (most common), followed by types 2, 3, 4, 27, 29, and 57.
- Flat warts - HPV types 3, 10, and 28.

- Butcher's warts - HPV type 7 (although some data suggest the association may be weak).
- Focal epithelial hyperplasia (Heck disease) - HPV types 13 and 32.
- Cystic warts - HPV type 60 ^[1].

Pathophysiology

Warts can affect any area on the skin and mucous membranes. The HPV virus infects the epithelium, and systemic dissemination of the virus does not occur. Viral replication occurs in differentiated epithelial cells in the upper level of the epidermis; however, viral particles can be found in the basal layer.

Prognosis

Approximately 65% of warts disappear spontaneously within 2 years. When warts resolve on their own, no scarring is seen. However, scarring can occur as a result of different treatment methods. Growth of periungual or subungual warts may result in permanent nail dystrophy. Treatment failures and wart recurrences are common, more so among immunocompromised patients. Normal-appearing perilesional skin may harbor HPV, which helps explain recurrences.

Common warts are usually asymptomatic, but they may cause cosmetic disfigurement or tenderness. Plantar warts can be painful, and extensive involvement on the sole of the foot may impair ambulation.

Malignant change in non-genital warts is rare but has been reported and is termed verrucous carcinoma. ^{2,3,5} Verrucous carcinoma is considered to be a slow-growing, locally invasive, well-differentiated squamous cell carcinoma (SCC) that may be easily mistaken for a common wart. It can occur anywhere on the skin but is most common on the plantar surfaces. Although this type of cancer rarely metastasizes, it can be locally destructive.

Homoeopathic Approach to warts

Various studies shows that homoeopathic medicines are effective in warts.

Homoeopathic repertory of skin – Dr. Douglass, repertory part for warts & condylomata is a useful with a very simple construction.

Common remedies for treating warts include Thuja occidentalis, Nitric acid, Causticum, Calcarea Carbonica, Natrum muriaticum and Dulcamara ^[1]. Even though warts are local diseases, they should be treated with internal

medicine based on the individualisation of the case ^[3]. Oza have described the homoeopathic concept and treatment of warts ^[4]. Sahoo *et al* observed that selecting the right medicine with suitable potency is significant in its treatment ^[5]. This case was selected to report the role of homoeopathic medicine in treating cutaneous warts through 50 – millesimal scale with the aid of Douglass repertory of skin.

Case Report

A 4-year-old female child presented with Warts with multiple warts on the fingers of both hands. Initially, one wart appeared, hard in consistency with itching, located on the medial side of the 4th finger since 4 months. The child accidentally inserted the finger into a table fan, and a small part of warts was cut off and in the following month, new warts appeared on nearby fingers, including periungual locations.

The itching was severe, painful and have an offensive smell sometimes resulting in bleeding. The child would frequently wash her hands under tap water, which gave her relief. The child is active in her studies and have good cooperation with people around her want to get attention of others, desire sweets, thermal belongs to chilly. The child had a history of lingual frenulum, which resolved by age and all her other generals are normal. Paediatric clinicians of modern medicine referred the case to an allopathic medical college for cauterisation. The parents, reluctant to proceed with surgery, visited the homeopathic alternative management.

Clinical Examination and Diagnosis

- **Inspection:** Multiple hard warts with irregular shape on right and left-hand fingers
- **Location:** Lateral right medial side of 4th finger initially; after injury, later spread to adjacent fingers and left thumb – periungual warts present
- **Surface:** Hard, dry, rough
- **Associated symptoms:** Intense itching, bleeding on scratching
- **Diagnosis:** Common Warts (*Verruca vulgaris*)

Repertorial totality

Dougl - Warts locality fingers

Douglass - Warts objectively, horny or hard

Douglass - Warts objectively, bleeding

Dougl - Warts, subjectively, painful

Douglass - Warts, subjectively, itching.

		Calc.	Nit-ac.	Thuja.	Caust.	Sep.	Sulph.	Lyc.	Rhus-t.	Ant-c.	Ars.	Bar-c.	Carb-an.	Dulc.	Euphr.	Hep.	Kali-c.	Lach.	Nat-c.	Nat-m.	Petr.	Phos.	Psor.	Ran-b.	Sil.	Staph.	Am-c.	Ambr.
Total		5	5	5	4	4	4	3	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	1	1	
Rubrics		5	5	5	4	4	4	3	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	1	1	
Kingdom		5	5	5	4	4	4	3	3	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	1	1	
Dougl. - Warts; Locality; fingers(26)		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Dougl. - Warts; Objectively; horny or hard(14)		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Dougl. - Warts; Objectively; bleeding(11)		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Dougl. - Warts; Subjectively; painful(24)		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
Dougl. - Warts; Subjectively; itching(11)		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	

Fig 1: Repertorial chart

Prescription and Follow-Up

Prescription Details

- Medicine: Nitric Acid 0/3 (LM 3)

Preparation

- To a 10 ml bottle filled $\frac{3}{4}$ with distilled water, 1 pill of Nitric Acid 0/3 were added

- 2 drops of rectified spirit added to prevent deterioration
- **Dosage**
- 5 drops from this bottle mixed in $\frac{1}{2}$ glass of water, taken twice daily
- 10 succussions to be given to the bottle each morning before administration

Follow-up Timeline

- **Day 4:** One of the warts fell off spontaneously
- **Day 7:** All warts cleared from fingers
- No itching or bleeding observed; child comfortable

- No side effects or recurrence reported.

The case followed up for 6 months with saccharum lactis 4 dose (weekly one dose), plain distilled water with 2 drops of dispensing alcohol and asked to take one drop in $\frac{3}{4}$ water and take 1 spoon of it and discard the remaining with no succussion advised. No recurrence till on year for warts, visited for fever conditions occasionally till one year no such recurrence of warts.

Pictures of Before and After Treatment



Fig 2



Fig 3



Fig 3

Discussion

Homeopathy provides a gentle and effective approach for the treatment of common warts, particularly in children, where surgical interventions may cause trauma or fear. This case showed notable improvement within one week, demonstrating the speedy action of individualized homeopathic treatment when applied correctly.

Repertory of skin by M.E Douglass is used in this case. In the preface, the author has stated the reason for writing such a book, keeping in mind that the homoeopathic practitioner and student, that one should become skilful in the principles of general medicine, and in knowledge of the general course and behaviour of skin diseases, in order to treat skin affections intelligently and successfully as the skin is the outer man that always receives the great attention, prioritising the cause and the totality of each skin ailments for a successful prescription.

Construction of chapters: A general pattern is being followed as described below:

- A general introduction

- Pathology and aetiology
- Diagnosis
- Prognosis
- Treatment including appropriate external applications and homoeopathic therapeutics, with brief description of symptoms of many conditions presented according to their significance, and some of them presented without any therapeutics [6].

In this case, Douglass' Repertory was used with Dr. Olin Drake's method—analyzing the cause (injury), location (fingers), subjective symptoms (itching), and objective signs (hard, bleeding warts) [6]. Synergy software is used Previously known as Kent Homeopathic, Synergy was founded in 1986 by David Warkentin, who was passionate about homeopathy. David had a vision to distill the complex process of homeopathic case analysis into an intuitive program that would expand the knowledge base and curative abilities of homeopaths everywhere. Mac Repertory and Reference Works are the two iconic programs that came out of this effort and they have been indispensable and powerful tools for case analysis and effective prescription for the last 30+ years [7].

The correct remedy along with the correct potency and proper repetition helps in fast recovery. This helped in this case too. The use of the 50 millesimal (LM) scale potency, as advocated by Dr. Samuel Hahnemann in the 6th edition of the Organon, was especially beneficial. LM potencies are administered in liquid form, which allows for daily dosing, minimal aggravation, and rapid, sustained action. Each dose is diluted in water and succussed before administration, enhancing the remedy's dynamism and adaptability to the

patient's changing state ^[8].

Administration of medicine in 50- millesimal scale potency

a) Mode of preparation of medicinal solution for dispensing

- i) Firstly take a new unused phial of 120l60/30 ml, with new washer and cap are taken.
- ii) $\frac{3}{4}$ The part of phial is filled up with purified or distilled water.
- iii) Only one medicated globule of number 10 of selected medicine in desired potency is added.
- iv) To the solution 5/8/10 drops of rectified spirit are added as preservative agent.
- v) The phial is closed with cork tightly.
- vi) Now, this medicinal solution is ready for use.

b) Directions to patient for taking of medicinal solution

- 1) Before taking the medicine each time 8/10/12 downward succussions are given, according to the susceptibility of the patient- 10 for a less sensitive patient and 12 times for least excited and sensitive patients.
- 2) After succussion, one dose is taken in $\frac{3}{4}$ th glass of pure water, stir it well with a tea- spoon.
- 3) One or two teaspoonfuls from it should be taken by the patient and the rest portion of the solution to be thrown away.
- 4) Each dose from the medicinal solution of each potency is to be applied in the same manner.

If there is any aggravation by taking the medicine in above-mentioned process then repetition of taking of the medicine is to be stopped. The aggravation will be diminished gradually in a short period and then the same remedy is diluted further in 2nd or 3rd or if required in the 4th glass of water and only one teaspoonful of it will be taken and rest portion will be thrown away ^[9].

This integrated method of combining repertorial accuracy, dilution benefits, and Hahnemann's dynamic dose method led to a swift and gentle recovery, validating the power of classical homeopathy in managing dermatological conditions like warts.

Conclusion

A complete disappearance of cutaneous warts within two months of homoeopathic treatment is evidence of the definitive role of Nitric acid 0/3 in the cure of warts. Since it is a single case report, a well-designed study with large sample size is recommended to prove the effectiveness of homoeopathic remedies for treating cutaneous warts.

Conflict of Interest

Not available

Financial Support

Not available

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How to Cite This Article

Mohan AS, Bhuvaneshwari G. A case report: Rapid resolution of verruca vulgaris with homoeopathy using douglass skin repertory and renewed dynamization. *International Journal of Homoeopathic Sciences*. 2025;9(4):570-573.

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